2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47748

Apr 27, 2005 Secretary of State

Entity Name: LAKE LOUISA & LAKE NELLIE OAKS HOMEOWNERS' ASSN., INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 120561 CLERMONT, FL 34712

Current Mailing Address: New Mailing Address:

P.O. BOX 120561 CLERMONT, FL 34712

FEI Number: 59-3122921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PORTER, RENCHELLE 11525 NELLIE OAKS BERD

LAUN, GREG 11500 NELLIE OAKS BEND CLERMONT, FL 34711 CLERMONT, FL 34711

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GREG LAUN 04/27/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete SCOTT, LISA LAUN, GREG Name: Name: 9001 MOSSY OAK LANE. Address: Address:

11500 NELLIE OAKS BEND City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition WETTERING, TRACY Name: CLARK, SCOTT Name:

Address: 11535 NELLIE OAK BEND Address: 11520 NELLIE OAKS BEND City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition POACK, RENCHELLE ANN HEFFRON, NORMA Name: Name:

9035 MOSSY OAK LAKE Address: 11525 NELLIE OAKS BEND Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition DEITRICK, DONNA Name: Name: PORTER, RENCHELLE

9042 MOSSY OAK LN. Address: Address: 11525 NELLIE OAKS BEND City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition

JOHNSON, ANN BUCHANAN, DEVON Name: Name: 9045 MOSSY OAK LANE 9110 MOSSY OAK LANE Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition

WETTERING, FRED DOOLAN, TOM Name: Name:

Address: 11535 NELLIE OAKS BEND Address: 11601 NELLIE OAKS BEND CLERMONT, FL 34711 CLERMONT, FL 34711 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENCHELLE PORTER D 04/27/2005